- 1	5-1 ne re mbe	porting period ended r 31, 2004 RECEIVED APR © 5 2005	SECURITIES AN	ORIGINAL) NITED STATES ND EXCHANGE COMM hington, D.C. 20549	 IISSION	OMB APPROVAL OMB Number: 3235-0337 Expires: September 30, 2006 Estimated average burden hours per full response
	Page 1	202	j	FORM TA-2		
R	EC	FORM FO		ACTIVITIES OF TR		AGENTS CHANGE ACT OF 1934
		ATTENTION:	CONSTITUTI	AL MISSTATEMENT E FEDERAL CRIMIN 1001 and 15 U.S.C. 78	NAL VIOLA	
		I name of Registrant as stat not use Form TA-2 to change nam	_	Form TA-1:		
-	CE	NTRAL NATIONAL BAN	K	·		·
2.	a.	During the reporting period (Check appropriate box.)	d, has the Registrant	engaged a service company	y to perform a	ny of its transfer agent functions?
		☐ All	☐ Some	∑ None		
	b.	If the answer to subsection company(ies) engaged:	on (a) is all or some	, provide the name(s) and	d transfer age	ent file number(s) of all service
		Name of Transfer Agent(s	·):		File	No. (beginning with 84- or 85-):
÷						
				Do		

c. During the reporting period, has the Registrant been engaged as a service company by a named transfer agent to perform transfer agent functions?

d. If the answer to subsection (c) is yes, provide the name(s) and file number(s) of the named transfer agent(s) for which the Registrant has been engaged as a service company to perform transfer agent functions: (If more room is required, please complete and attach the Supplement to Form TA-2.)

No No

Name of Transfer Agent(s):	File No. (beginning with 84- or 85-):

☐ Yes

3.	a.	Board of C	er of the Currer posit Insurance	ncy Corpor e Federa	ation 1 Reserve Syste		only.)			
	b.	During the repinformation re			egistrant amend inaccurate, inco						which
			amendment(s) to file amendm able	ent(s)							
	c.	If the answer t	o subsection (b) is no,	provide an expl	anation:					
WI	E D:	ID NOT REPOR	RT THE CHAN	GE IN	THE TELEPH	ONE AREA C	ODE	WITHIN	60 days o	F ACTUAL C	HANGE.
		TELEPHONE A RE ALSO AME							TNG ADDRE	PSS AS OF O	3-29-2005)
		1,									<u> </u>
		If	the response	to any	of questions	4-11 below	is nor	ie or zer	o, enter "0.	יי	
4.	Nui	mber of items re	eceived for tran	isfer dur	ing the reportir	ng period:				2	13
5.	a.	Total number (System (DRS)			older accounts, plans and/or d						65
	b.	Number of ind as of Decembe			dividend reinve					ounts'	0
	c.	Number of ind	lividual security	yholder l	DRS accounts a	s of December	31:	,.,			0
	d.	Approximate processing December 31:	percentage of i	ndividua	al securityholde	er accounts from	n sub:	section (a)	in the follow	wing categories	as of
		Corporate Equity Securities	Corporate Debt Securities		Open-End Investment Company Securities	Limited Partnersh Securitie	ip	Municip Secur	1	Other Securities	
		100%	0		0	0		0		0	
6.	Nur	mber of securiti	es issues for w	hich Reg	gistrant acted in	the following	capaci	ties, as of	December 31	•	_
					Corporate Securities	Open-End Investment Company	Par	imited tnership ecurities	Municipal Debt Securities	Other Securities	
			_	Equity	Debi	Securities					
	a.	Receives items and maintains securityholder	the master								
	b.	Receives items but does not m	for transfer								
		master security	holder files:				ļ				_
	c.	Does not receiveransfer but ma master security	aintains the								

	b. c.	Number of issues for which dividend reinvestment plan and/or direct purchase plan services were provided, as of December 31: Number of issues for which DRS services were provided, as of December 31: Dividend disbursement and interest paying agent activities conducted during the reporting period: i. number of issues ii. amount (in dollars)						
8.	a.	Number and aggregate market value of securities aged record differences, existing for more than 30 days, as of December 31:						
		Prior Current Transfer Agent(s) Transfer Agent (If applicable)						
		i. Number of issues ii. Market value (in dollars)						
	b.	Number of quarterly reports regarding buy-ins filed by the Registrant with its ARA (including the SEC) during the reporting period pursuant to Rule 17Ad-11(c)(2):						
	c.	During the reporting period, did the Registrant file all quarterly reports regarding buy-ins with its ARA (including the SEC) required by Rule 17Ad-11(c)(2)?						
		☐ Yes ☐ No						
	d.	If the answers to subsection (c) is no, provide an explanation for each failure to file:						
9.	a.	During the reporting period, has the Registrant always been in compliance with the turnaround time for routine items as set forth in Rule 17Ad-2?						
		☐ Yes ☐ No						
		If the answer to subsection (a) is no, complete subsections (i) through (ii).						
		i. Provide the number of months during the reporting period in which the Registrant was not in compliance with the turnaround time for routine items according to Rule 17Ad-2.						
		ii. Provide the number of written notices Registrant filed during the reporting period with the SEC and with its ARA that reported its noncompliance with turnaround time for routine items according to Rule 17Ad-2.						
10	and	mber of open-end investment company securities purchases and redemptions (transactions) excluding dividend, interest distribution postings, and address changes processed during the reporting period:						
	a. b.	Total number of transactions processed: Number of transactions processed on a date other than date of receipt of order (as ofs):						

11. a. During the reporting period, provide the date of all database searches conducted for lost security holder accounts listed on the transfer agent's master security holder files, the number of lost security holder accounts for which a database search has been conducted, and the number of lost security holder accounts for which a different address has been obtained as a result of a database search:

Date of Database Search O	Number of Lost Securityholder Accounts Submitted for Database Search O	Number of Different Addresses Obtained from Database Search O
THE BANK DID NOT HAVE AN	LOST SECURITYHOLDERS DURING	THE REPORTING PERIOD.

b.	Number of lost securityholder accounts that have been remitted to states during the	•
	reporting period:	0

SIGNATURE: The Registrant submitting this Form, and the person signing the Form, hereby represent that all the information contained in the Form is true, correct, and complete.

Manual signature of Official responsible for Form:	Title:CHAIRMAN OF THE BOARD AND PRESIDENT
WORTH HARRIS CARTER, JR.	Telephone number: 276-656-1776
Name of Official responsible for Form: (First name, Middle name, Last name)	Date signed (Month/Day/Year):
WORTH HARRIS CARTER, JR.	MARCH 29, 2005